

117TH CONGRESS  
2D SESSION

# H. RES. 974

Supporting the goals and ideals of National Women and Girls HIV/AIDS Awareness Day.

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## IN THE HOUSE OF REPRESENTATIVES

MARCH 9, 2022

Ms. LEE of California (for herself, Ms. TITUS, Ms. WILLIAMS of Georgia, Ms. SEWELL, Ms. MATSUI, Ms. BROWNLEY, Mr. RUSH, Ms. NORTON, Mrs. WATSON COLEMAN, Mr. KILMER, and Mr. COSTA) submitted the following resolution; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Foreign Affairs, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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# RESOLUTION

Supporting the goals and ideals of National Women and Girls HIV/AIDS Awareness Day.

Whereas 1,700,000 individuals are newly infected with human immunodeficiency virus (HIV) every year, including 40,000 individuals in the United States;

Whereas, in the United States, more than 770,000 individuals with acquired immunodeficiency syndrome (AIDS) have died since the beginning of the HIV epidemic, including nearly 16,000 deaths among individuals diagnosed with HIV in 2018;

Whereas, according to the Centers for Disease Control and Prevention (CDC), Black/African-American, Latino, Asian-American, American Indian, Alaska Native, and Native Hawaiian and other Pacific Islander individuals are disproportionately affected by HIV in the United States;

Whereas, according to the CDC, Black/African-American, Latino, and White gay and bisexual men and Black/African-American heterosexual women bear the greatest burden of new HIV infections in the United States;

Whereas homophobia, transphobia, and biphobia are associated with minority stress (high stress levels faced by members of stigmatized groups) and may contribute to sexual behaviors that can increase the risk of HIV transmission and create barriers to preventative care and treatment for HIV/AIDS;

Whereas, among the 3,000,000 HIV testing events reported to the CDC in 2017, the percentage of transgender individuals who received a new HIV diagnosis was 3 times the national average for all individuals;

Whereas, despite significant gains, every week 6,000 adolescent girls and young women are infected with HIV worldwide;

Whereas inequitable gender norms, transactional sex, sexual violence, sexually transmitted infections (STIs), and early pregnancy continue to drive new HIV infections in many countries and young women account for 61 percent of new HIV infections among young individuals in sub-Saharan Africa;

Whereas, from 2015 to 2019, the rate of new HIV infections among Black/African-American women was 11 times that of White women and 4 times that of Latina women;

Whereas, as of the end of 2019, an estimated 38,000,000 individuals globally were living with HIV/AIDS, including 1,800,000 children;

Whereas, in the United States, almost 40 percent of new HIV infections occur in individuals from 13 to 20 years of age;

Whereas, among new adolescent HIV diagnoses in the United States in 2019, 85 percent occurred in males, 12 percent occurred in females, and 3 percent occurred in transgender females;

Whereas, in the United States in 2019, individuals from 13 to 24 years of age comprised 21 percent of the 36,398 new HIV diagnoses;

Whereas 44 percent of individuals from 13 to 24 years of age living with HIV are unaware of their HIV status;

Whereas Black/African-American youth are the group most affected by the HIV epidemic, comprising 57 percent of new transmissions in individuals who are 13 to 24 years of age;

Whereas, when a woman living with HIV receives comprehensive care before, during, and after a pregnancy, the risk of passing HIV to the child is less than 1 percent;

Whereas women and adolescent girls face serious challenges with respect to prevention of infection due to inadequate access to evidence- and rights-based, age-appropriate, and comprehensive sexuality and HIV-prevention education and tools, including—

- (1) pre-exposure prophylaxis (PrEP) and testing;

(2) sexual- and gender-based violence prevention and care services; and

(3) sexual and reproductive health information and services, including screening and treatment for STIs and access to a full range of contraceptive methods, including male and female condoms;

Whereas the Division of Adolescent and School Health of the CDC is the only Federal program supporting HIV prevention for adolescents in schools;

Whereas the Patient Protection and Affordable Care Act provides youth, including those living with or affected by HIV/AIDS, better access to healthcare coverage, more health insurance options, additional funding for sexual education, a prohibition against denying individuals living with HIV access to healthcare, and expanded access to Medicaid, which will support more youth living with HIV to receive care;

Whereas, in 2021, the Biden administration, as stated in the 2022–2025 HIV National Strategic Plan (HIV Plan), committed to reenergize and strengthen a whole-of-society response to the HIV epidemic while supporting people with HIV and reducing HIV-associated morbidity and mortality;

Whereas the Biden administration’s National Strategy on Gender Equity and Equality states a commitment to “address sociocultural factors that compromise access to care for women and girls, rendering them more vulnerable to HIV/AIDS, unattended births, and other poor health outcomes—including by engaging men and boys as partners in addressing gender inequities in health”;

Whereas the Sustainable Development Goals of the United Nations established a global target to end AIDS as a public health threat by 2030, and the United Nations is committed to achieve gender equality and empower all women and girls;

Whereas the document published by UNAIDS and titled “Global Aids Strategy 2021–2026—End Inequalities. End AIDS”—

(1) reinforces the global need for “tailored, combination HIV prevention packages . . . including scale-up of underutilized prevention approaches and community-led responses, such as comprehensive sexuality education, sexual and reproductive health (including contraception), harm reduction services, condoms, lubricants, PrEP and U=U, and emerging prevention tools, such as antiretroviral containing vaginal rings”; and

(2) includes access to sexual and reproductive health services in the global targets of the Strategy;

Whereas Federal and State criminal law does not reflect the 4 decades of medical advances and discoveries made with regard to transmission and treatment of HIV/AIDS;

Whereas 2022 marks the 16th annual observance of National Women and Girls HIV/AIDS Awareness Day;

Whereas the 2021 National Women and Girls HIV/AIDS Awareness Day theme, “You. Me. WE. Changing the face of HIV”, highlights the role that everyone can play in HIV prevention, including individuals, community organizations, healthcare professionals, businesses, and faith institutions;

Whereas the Office on Women’s Health and the Office of Infectious Disease and HIV/AIDS Policy of the Depart-

ment of Health and Human Services, HIV advocates, and individuals living with HIV play a critical role in helping recognize the effect of HIV/AIDS on women and girls; and

Whereas each year on March 10, individuals, organizations, and policymakers across the United States participate in National Women and Girls HIV/AIDS Awareness Day to increase awareness of, spark conversations on, and highlight the work being done to reduce the incidence of HIV among women and girls while showing support for those with HIV; Now, therefore, be it

1       *Resolved*, That the House of Representatives—

2               (1) recognizes the progress made over 40 years,  
3               and recommits to bipartisan efforts, to end the HIV  
4               epidemic in the United States and globally;

5               (2) calls for greater focus on the HIV-related  
6               vulnerabilities of women and girls, including those at  
7               risk of, or who have survived or faced, violence or  
8               discrimination as a result of the disease;

9               (3) supports strong, sustained investment in  
10              prevention, care, treatment services, and research  
11              programs, including efforts to reduce disparities and  
12              improve access to life-saving medications, for women  
13              and girls affected by HIV and individuals diagnosed  
14              with HIV in the United States and globally;

15              (4) supports the implementation of the HIV  
16              Plan and its goals to reduce new HIV infections, in-  
17              crease access to care and improve health outcomes

1 for women and girls living with HIV, reduce HIV-  
2 related disparities and health inequities, and achieve  
3 a more coordinated national response to the HIV  
4 epidemic;

5 (5) supports the investment of the United  
6 States President's Emergency Plan for AIDS Relief  
7 (PEPFAR) in the Determined, Resilient, Empow-  
8 ered, AIDS-free, Mentored, and Safe (DREAMS)  
9 partnership, which aims to significantly reduce new  
10 HIV infections among adolescent girls and young  
11 women through evidence-based, multi-sectoral ap-  
12 proaches;

13 (6) encourages PEPFAR to increase investment  
14 in the DREAMS partnership;

15 (7) encourages youth-friendly, culturally respon-  
16 sive, inclusive, and accessible healthcare services, es-  
17 pecially access without parental consent to medica-  
18 tions such as pre- and post-exposure prophylaxis and  
19 antiretroviral therapy, to better provide for the early  
20 identification of HIV through voluntary routine test-  
21 ing and to connect those in need to clinically and  
22 culturally appropriate care and treatment as early as  
23 possible;

(B) combat discrimination on the basis of sexual orientation and gender identity; and

(9) promotes access to up-to-date, inclusive, culturally responsive, and medically accurate information about HIV, such as information on pre- and post-exposure prophylaxis, in sexual education curricula to ensure that all individuals, including women and girls, are educated about HIV, as called for in the 2022–2025 HIV National Strategic Plan.

